

**you bet**

**I CARE** !

**Caring and Learning  
Environments:**

**Quality in Child Care  
Centres Across Canada**

**you bet I CARE!**

**Caring and Learning Environments:  
Quality in Child Care Centres  
Across Canada**

**Principal Investigators:**

Hillel Goelman  
Department of Educational Psychology and Special Education  
University of British Columbia

Gillian Doherty  
Child Care Consultant, Ontario, and  
Adjunct Professor, Department of Family Relations and Applied Nutrition  
University of Guelph

Donna S. Lero  
Department of Family Relations and Applied Nutrition  
University of Guelph

Annette LaGrange  
Faculty of Education  
University of Calgary

Jocelyne Tougas  
Child Care Consultant, Québec

Published by: Centre for Families, Work and Well-Being, University of Guelph,  
Ontario

Copy Editing: Denis Alarie and Judith Bell

Translation: Jocelyne Tougas

Design/layout: Fairmont House Design

Printing: MOM Printing

To obtain additional copies of this report, please contact:

Centre for Families, Work and Well-Being, University of Guelph,  
Guelph, Ontario N1G 2W1

Tel: (519) 824-4120, ext. 3829

Fax: (519) 766-0691

E-mail: [cwww@uoguelph.ca](mailto:cwww@uoguelph.ca)

Website: <http://uoguelph.ca/cwww>

#### **Canadian Cataloguing in Publication Data**

This research was funded by the Child Care Visions Program of the  
Employability and Social Partnerships Division of Human Resources  
Development Canada. The views expressed are solely those of the authors and  
do not represent the official policy of the Department of Human Resources  
Development Canada.

# Executive Summary

Canadian experts in diverse fields — for example, health,<sup>1</sup> education,<sup>2</sup> economics,<sup>3</sup> crime prevention<sup>4</sup> — as well as people concerned about social justice and cohesion,<sup>5</sup> have identified quality child care as a crucial component in addressing a variety of broad societal goals. This report documents the findings of the largest, most systematic and most multi-jurisdictional study ever conducted in Canada to explore the relationships between centre quality and:

1. centre characteristics;
2. teaching staff wages and working conditions; and
3. teaching staff characteristics and attitudes.

Data were collected in 122 infant/toddler rooms and 227 preschool rooms in 234 centres across six provinces and one territory. The data analyses went beyond a simple description of these classrooms and identified the critical factors that *predict* the level of quality in a child care centre.

The scores obtained by the teaching staff as a group on the *Caregiver Interaction Scale (CIS)* indicate high levels of sensitive, attentive and engaged teacher behaviour with children and low levels of harshness or detachment. These *CIS* scores, along with the scores from the *Infant/Toddler Environment Rating Scale (ITERS)* and the *Early Childhood Environment Rating Scale–Revised (ECERS–R)*, indicate that physically safe environments with caring, supportive adults are the norm in the majority of centres in Canada. However, fewer than half of the preschool rooms (44.3%) and slightly more than a quarter of the infant/toddler rooms (28.7%), are also providing activities and materials that support and encourage children’s development. Instead, the majority of the centres in Canada are providing care that is of minimal to mediocre quality. The children’s physical and emotional health and safety are protected, but few

opportunities for learning are provided. This represents a major lost opportunity to capitalize on the potential of child care to support children’s development.

Young children enrolled in full-time child care, as were the subjects of this study, spend a high proportion of their waking hours in the child care setting. Given our understanding of the importance of developmentally appropriate stimulation for young children, the low levels of quality revealed in this study should be a major concern and focus of remediation for politicians, policy analysts, parents and the whole society. The finding that 7.8% of the infant/toddler rooms and 7.1% of the preschool rooms were providing a level of care that has been described by the authors of the scales as likely to compromise children’s development<sup>6</sup> is of special concern. Of equal concern is the overall lower level of care in infant/toddler rooms, where the children are the youngest and most vulnerable.

Statistical analyses revealed that higher levels of staff sensitivity were associated with:

1. higher staff wages;
2. teaching staff with higher levels of ECCE-specific education;
3. better benefits;
4. higher staff levels of satisfaction with their relationships with colleagues and the centre as a work environment;
5. the centre being used as a student-teacher practicum site;
6. the centre receiving subsidized rent and/or utilities (a factor that allows it to pay higher wages);
7. the centre having favourable staff: child ratios; and
8. the centre being non-profit.

<b>Summary of Significant Direct and Indirect Predictors of <i>ITERS</i> and <i>ECERS-R</i> Total Scores, 1998</b>		
<b>Types of predictor</b>	<b><i>ITERS</i> score</b>	<b><i>ECERS-R</i> score</b>
<b><i>Direct</i></b> predictors of <i>ITERS</i> or <i>ECERS-R</i> scores	<ol style="list-style-type: none"> <li>1. The observed staff member’s wages</li> <li>2. The centre is used as a student-teacher practicum site</li> <li>3. The centre receives subsidized rent and/or utilities</li> </ol>	<ol style="list-style-type: none"> <li>1. The observed staff member’s wages</li> <li>2. The observed staff member’s level of satisfaction with colleagues and the work environment</li> <li>3. The adult:child ratio at the time of observation</li> <li>4. The centre is used as a student-teacher practicum site</li> <li>5. The centre receives subsidized rent and/or utilities</li> </ol>
<b><i>Direct AND indirect</i></b> predictors of <i>ITERS</i> and <i>ECERS-R</i> scores	<ol style="list-style-type: none"> <li>1. The observed staff member’s level of ECCE-specific education</li> <li>2. The number of staff in the observed room</li> </ol>	<ol style="list-style-type: none"> <li>1. The observed staff member’s level of ECCE-specific education</li> <li>2. The number of staff in the observed room</li> </ol>
<b><i>Indirect</i></b> predictors of <i>ITERS</i> and <i>ECERS-R</i> scores	<ol style="list-style-type: none"> <li>1. The auspice of the centre</li> <li>2. Level of full-time fees</li> </ol>	<ol style="list-style-type: none"> <li>1. The auspice of the centre</li> <li>2. Level of full-time fees</li> </ol>



Two different statistical techniques were used to determine the variables that predict *ITERS* and *ECERS-R* scores — logistic regressions and path analyses. These demonstrate not only which variables are important predictors, but also the relative weight of each, and which contribute directly, indirectly, or both directly and indirectly to quality. The table summarizes the findings of these analyses. Each set of predictor variables in the table is listed in order of its relative strength. Thus, the strongest direct predictor is wages. Auspice is the strongest indirect predictor; while it does not directly predict quality, it does predict wage level, which, in turn, predicts quality. The strongest variable that is both a direct and an indirect predictor is the level of the observed staff member's ECCE-specific education.

The table also demonstrates very clearly that quality is not the result of simple uni-directional relationships between predictors and outcomes, but rather a dynamic interaction among different kinds of variables. Improvements in the quality of child care in Canada will depend upon addressing this complex interaction itself, not just one or two variables. A summary follows of a set of guiding principles that we drew from the study, and our recommendations.

#### Notes

- 1 National Forum on Health 1997.
- 2 Council of Ministers of Education, Canada 1998.
- 3 Cleveland and Krashinsky 1998; Kent 1999.
- 4 National Crime Prevention Council 1996.
- 5 Battle and Torjman 2000; Jenson and Stroick 1999; National Council of Welfare 1999.
- 6 Clifford, Harms and Cryer 1991.